

Northern District of New York

Chapter 13

| Description | Dates incurred | Amount |
|--|--|---------------|
| 1. Late charges | | (1) \$ |
| 2. Non-sufficient funds (NSF) fees | | (2) \$ |
| 3. Attorney fees | | (3) \$ |
| 4. Filing fees and court costs | | (4) \$ |
| 5. Bankruptcy/Proof of claim fees | 3/27/2020 | (5) \$ 425.00 |
| 6. Appraisal/Broker's price opinion fees | | (6) \$ |
| 7. Property inspection fees | | (7) \$ |
| 8. Tax advances (non-escrow) | | (8) \$ |
| 9. Insurance advances (non-escrow) | | (9) \$ |
| 10. Property preservation expenses. Specify: | each date must be included for each inspection | (10) \$ |
| 11. Other. Specify: | | (11) \$ |
| 12. Other. Specify: | | (12) \$ |
| 13. Other. Specify: | | (13) \$ |
| 14. Other. Specify: | | (14) \$ |

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.
B 10S2 (Supplement 2) (12/11)

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Part 2: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this Supplement applies.

Check the appropriate box.

☐ I am the creditor.

☒ I am the creditor's authorized agent. (Attach copy of power of attorney, if any.)

I declare under penalty of perjury that the information provided in this Notice is true and correct to the best of my knowledge, information, and reasonable belief.

X /s/ Diane Tran Date 4/23/2020
Signature mm/dd/yyyy

Print: Diane Tran Title Authorized Agent
First Name Middle Name Last Name

Company Leipold,, Harrison, & Associates PLLC

Address 701 Highlander Blvd, Ste 200
Number Street
Arlington, TX 76015
City State ZIP Code

Contact phone 800.349.1254 Email dtran@lha-law.com

UNITED STATES BANKRUPTCY COURT
Northern District of New York

In Re: Darryl L Smith

Case No. 20-10075

Debtor(s)

Chapter 13

CERTIFICATE OF SERVICE

I hereby certify that on 4/23/2020 , a true and correct copy of the foregoing Post-Petition Fee Notice was served upon all interested parties pursuant to the Court's CM/ECF system.

By: /s/Diane Tran

Wilmington Savings Fund Society, FSB, as trustee of
Stanwich Mortgage Loan Trust C/O Carrington Mortgage
Services, LLC 701 Highlander Blvd, Ste 200 Arlington, TX
76015. 682-808-5370

Debtor through the debtor's attorney of record

Darryl L Smith
320 Kingsley Road
Burnt Hills, NY 12027

Debtor's Counsel

William F. Berglund
O'Connell and Aronowitz
54 State St.
Albany, NY 12207

Trustee

Andrea E. Celli-Trustee
Chapter 13 Standing Trustee
7 Southwoods Boulevard
Albany, NY 12211

US Trustee

Office of the U.S. Trustee
Leo W. O'Brien Federal Building
11A Clinton Ave, Room 620
Albany, NY 12207

IP Carrington Mortgage Services, LLC / Laquita Jimerson

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Loan#:

Go

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<<

>>

Vendor

Address:

Payee Code:

Vendor Contact:

Vendor Ref #:

Servicer:

Inv. ID / Cat. ID

Investor Name:

Invoice ID:

Class Code:

Entity Code:

GSE Code:

GSE REO Rem. Code:

HiType:

Litigation Status Code:

Man Code:

Roach and Lin, P.C.

6901 Jericho Turnpike Ste 240

Syosset, NY 11791

867

Cren

Carrington Mortgage Services, LLC

02354/00001

SMAC 2019-5 INV 2354 CLASS A

271113854

Regarding:

DARRYL SMITH

320 KINGSLEY RD

BURNT HILLS, NY 12027

Investor Loan #:

Invoice Number:

60447

Invoice Status:

Check Requested (Exc)

Loan No.:

Acquisition Date:

Loan Type:

Conventional

Asset No.:

REO Loan Status:

N/A

REO Loan Status Date:

N/A

Referral Date:

1/21/2020

Loan Location:

BK Case No:

20-10075-1-rel

BK Chapter:

13

Submitted Date:

3/31/2020

Vendor Invoice Date:

3/31/2020

Paid In Full Date:

N/A

Foreclosure Removal Date:

N/A

MS Status:

N/A

Relief Requested Date:

N/A

Protection Begin Date:

N/A

Protection End Date:

N/A

Original Mortgage Amount: \$0.00

Principal Balance as of invoice create date: \$98,558.73

Principal Balance as of today's date: \$98,423.55

Bankruptcy - Bankruptcy Services

| | | | | | | | |
|------------|--------------|---------------|----------|------------|---------------|---------------|--------------|
| Submitted | 1st Reviewed | Last Reviewed | Accepted | Approved | Chk Requested | Chk Confirmed | Days To Proc |
| 03/31/2020 | 04/07/2020 | 04/09/2020 | | 04/07/2020 | 04/07/2020 | | 8 |

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| | | | | | | | | | |
|---------------|----------|----------|-------------------------|----------|------------------------------------|------------|----------------|--|---------------|
| Fees | Total: | \$425.00 | Invoicing Prev. Billed: | \$550.00 | Exc. Loan Allow: | | Exc. Milestone | | Exc Ord Allw: |
| Costs | Total: | \$0.00 | Invoicing Prev. Billed: | \$0.00 | Exc. Loan Allow: | | | | Exc Ord Allw: |
| | | | | | Exc. Loan Total Fees/Costs Allow: | | | | |
| Totals | Inv Amt: | \$425.00 | Prev. Billed: | \$550.00 | Loan Total Fees/Costs Prev.Billed: | \$2,146.25 | Exc Ord Allw: | | |

Fees

| A | B | I | C | Category | Subcategory | W/H | Aff. Ind. | Date | Qty | Price | Orig. Billed | Adjust | Net |
|--|---|-------------------|---|---------------|----------------|-----|-----------|----------|-----|----------|--------------|--------|----------|
| A | | C | | Attorney Fees | Proof of Claim | | | 03/27/20 | 1 | \$425.00 | \$425.00 | \$0.00 | \$425.00 |
| <div>Note: Legal fees for proof of claim. recoverable.</div> | | | | | | | | | | | | | |
| Total: | | | | | | | | | | | \$425.00 | \$0.00 | \$425.00 |
| Invoice Total: | | | | | | | | | | | \$425.00 | \$0.00 | \$425.00 |